



KENTUCKY TRANSPORTATION CABINET
Department of Vehicle Regulation
DIVISION OF DRIVER LICENSING

TC 94-180
Rev. 12/2017
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55+ DRIVING PROGRAM APPLICATION

SECTION 1: APPLICANT INFORMATION

ORGANIZATION NAME		POINT OF CONTACT <i>(first name, last name)</i>		
MAILING ADDRESS		CITY	STATE	ZIP
EMAIL	PHONE	PROGRAM PARTICIPANT FEE: \$		

SECTION 2: ATTESTATIONS

I attest that the attached curriculum shall be taught in strict accordance with 601 KAR 13:040 and shall contain the following:

- (1) *Concept of accident preventability including a discussion of the magnitude of traffic accident problems;*
- (2) *Techniques for defensive driving and handling critical situations, including but not limited to:*
 - (a) *Interpreting events that require evasive action;*
 - (b) *Determining the appropriate response to situations caused by mechanical failure of the motor vehicle;*
 - (c) *Determining risk factors created by a variety of psychological, social, and physical factors that can facilitate or inhibit the functions required in driving, including by not limited to:*
 1. *The effects and compensatory measures concerning the relationships between alcohol, drugs, or medication and driving performances;*
 2. *The negative stresses and compensatory measures associated with physical, mental, and social conditions as they relate to driver performances; and*
 3. *The age-related physical changes of drivers fifty-five (55) years of age and older.*
- (3) *Kentucky traffic laws and regulations, vehicle dynamics, capabilities, limitations, and highway environmental factors including but not limited to:*
 - (a) *Traffic laws and regulations, such as signs, signals, markings, right-of-way requirements, and speed;*
 - (b) *Vehicle capabilities, such as stopping distances and passing abilities; and*
 - (c) *Highway settings, operating environments and adverse conditions, including but not limited to conditions affected by illumination, obstructions, or the weather, such as snow, ice, or rain.*

I further attest to adhere to all standards as set forth in 601 KAR 13:040.

APPLICANT PRINTED NAME	APPLICANT SIGNATURE	DATE

FOR KYTC USE ONLY

REVIEWER PRINTED NAME	REVIEWER SIGNATURE	DATE
PROGRAM APPROVED: YES NO	COURSE IS VALID UNTIL <i>(mm/dd/yyyy)</i> :	